As identified earlier, the formal Review of Quality of Care (Regulation 45) completed by the registered manager must be submitted to Ofsted and relevant placing authorities at least once every 6 months. The review should be submitted within 28 days of its completion.

It is the expectation of the responsible individual that these reviews are developed on a monthly basis, or as and when the registered manager assesses it to be necessary. The registered manager may assess that due to events in the home, changes in residents or significant changes in staff for example it may be appropriate to carry out a further review outside of these timescales.

The reviews should be used as an improvement tool to help managers:

- See what they have done;
- Evaluate their progress;
- Set actions for the future.

The review report should:

- Be honest, objective and analytical;
- Not just report on the methods used to gather this information;
- Focus on the quality of the care provided and the experiences of the children cared for;
- Include the effect the care is having on outcomes and improvements for the children;
- Identify areas of strength and weakness;
- Include an action plan;
- Include the views of others, including the children.

To carry complete a review of the quality of care, the registered manager must establish and maintain a system for monitoring, reviewing, and evaluating the following:

- a. The quality of care provided for children;
- b. The feedback and opinions of the children and young people about their home, its facilities and the quality of care they receive from the registered manager and staff team; and
- c. Any actions that the registered manager considers necessary to improve or maintain the quality of care provided for children and young people;
- d. The feedback and opinions of the parents, placing authorities and other significant stakeholders in the care of the children and young people and the staff working there.

The registered manager should make available their schedule of monitoring to ensure that in their absence monitoring will continue.

The draft report should be sent to the service manager for quality assurance within 7 days of the new month. The report will then be quality assured and returned to the registered manager with comments and for submission to Ofsted.

Whilst it is the responsibility of the registered manager to establish and maintain their system of monitoring for the home, it is expected that the following will be covered:

Immediate

Response to Ofsted recommendations and requirements during and following an inspection. The quality assurance manager will support the registered manager to address any recommendations and requirements, also quality assuring the response to the draft inspection report. Any queries will be escalated to the service manager in the first instance, and also brought to the attention of the responsible individual.

Minimum of weekly

- i. Incidents including:
 - a. The use of physical interventions;
 - b. Episodes of missing from home;
 - c. Accidents and injuries;
 - d. Safeguarding or Child Protection concerns and referrals;
 - e. Notifications under Regulation 40.
- ii. Completion (or part completion) of the registered manager's audit tool;
- iii. Daily notes;
- iv. Part-completion of the registered manager's audit tool;
- v. Minimum weekly keyworker sessions that relay the impact of our care on the individual journeys and development of our children and young people;
- vi. Complaints and compliments log;
- vii. Check of children and young people's bedrooms to ensure cleanliness, good hygiene standards and maintenance or immediate repair/replacement of fixtures, fittings, and furnishings;
- viii. Fire log, tests, and drills, including a review of children and young people's involvement or attendance in the fire drills;
- ix. Day and activity planners;
- x. 1:1 consultation and debriefs following incidents;
- xi. Medication records:
- xii. Responses to behaviours including the effectiveness of relational practice, maintenance of expectations and boundaries;
- xiii. Staff signing-in book.

Minimum of monthly (each calendar month)

- i. Cleaning and hygiene rotas;
- ii. Fridge/freezer temperatures;
- iii. Menus, including quality and evidence of child and young person involvement in choice and preparation;
- iv. Communications book;
- v. Rotas and timesheets:
- vi. Continuing development of the Reg 45 Quality of Care report;
- vii. Visitor's log;
- viii. Staff supervision records and evidence of staff professional development and wellbeing;
- ix. 1:1 work/key worker sessions;
- x. Maintenance log, including repairs and escalation of any drift in repairs, maintenance, or renewal;
- xi. Health records;
- xii. Monetary records;
- xiii. Meetings staff and children or young people's minutes and actions;
- xiv. The care planning/files for individual children and young people, including:
 - a. Placement Plans;
 - b. Individual Behaviour Support Plans;
 - c. Monthly reports/summaries;
 - d. Contacts with parents/social workers/others;
 - e. Education attendance and attainment;
 - f. Risk management and safety planning;
 - g. The impact of our care on the development and progress of the child or young person.
- xv. Case management meetings;
- xvi. Review of the training matrix to identify new initiatives to meet the specific needs of children and young people, and to monitor staff progress through identified core and mandatory training;
- xvii. First aid;
- xviii. Fire log and attendance at drills.

The registered manager's monthly audit should be completed and submitted to the quality assurance manager by the 10th of the following month.

The responsible individual's escalation protocol should also be followed with specific regard to:

- 1. Regulation 40 notification;
- 2. Regulation 44 process;
- 3. Significant incidents;
- 4. Ofsted inspections.

Please see: Appendix 2: Responsible Individual Escalation Protocol.

Minimum of Quarterly

- i. Children and young people's placement planning;
- ii. All documentation relevant to the statutory care of children and young people;
- iii. Statutory review meetings for children and young people in our care;
- iv. Risk assessment and safety planning review to identify themes and trends;
- v. Continuing development of the regulation 45 Quality of Care review;
- vi. Education paperwork (plans and targets), progress towards desired outcomes and goals, and receipt of all necessary assessments and reports (including EHCPs);
- vii. Health reviews, documentation, and assessment, including those assessments that may be outstanding and require escalation.

For Guidance on what should be included within the report see Appendix 1: Regulations 45 Report on Review of Quality of Care.

Once a review is complete it must be sent to HMCI within 28 days.

Reports may also be provided to a placing authority.

3. Appendix 1: Regulations 45 Report on Review of Quality of Care

It is the responsibility of the registered manager to decide what should be included in the review of the home. The report should contain an analysis of the information monitored, reviewed, and evaluated, with the aim of learning from the information to inform and drive improvements in the home and for the quality care of the children placed there. The impact of our care on children and young people should be clearly described, helping to establish goals and outcomes that have been met and the identification of new targets for their growth and personal development. These plans, co-produced with children and young people wherever possible, should be aspirational as well as being achievable.

The following headings and guidance are for reference and do not all need to be included, this is to help inform a structure for reporting. The views and wishes of children, young people, and other key stakeholders should form an integral part of the analysis within the report.

The Quality and Purpose of Care Standard

- 1. Any safeguarding concerns or incidents in respect of a child accommodated at the children's home and the measures taken by the persons working at the children's home to respond effectively to these to ensure the safeguarding and welfare of the child. What has been learnt from these incidents? What have we changed as a result? Who, within the wider network, have we worked effectively with to ensure these risks are removed or mitigated?
- 2. The arrangements for children and young people coming to and leaving their home. This should therefore include or correlate with:
 - Consideration of impact assessments, progress following admission;
 - How effectively we have developed relationships and can demonstrate the
 positive impact of these on, for example, educational attendance and
 attainment, health and well-being needs being met or the child or young person
 being safe from harm;
 - The care and practical support we have continued to provide when a young person has left our care.
- 3. The arrangements for monitoring the quality of care provided, including the actions taken in response to recommendations made by the Regulation 44 Independent Person or, as the case may be, the reasons why the registered manager did not consider it appropriate or necessary to take any such actions;
- 4. In respect of each child or young person accommodated in their home, compliance with the placing authority's care plans and placement plans;
- 5. The arrangements for:
- 1. Consulting children and young people about the quality of the care we provide and for acting on the results of such consultation, with examples provided;
- 2. Involving children and young people in decisions about:
 - i. Their own care; and
 - ii. The day to day running of their home.
 - 6. Complaints in relation to the children's home or the children and young people, including any actions taken in response to such complaints and how complaints were resolved;
 - 7. Notifications of the events under Regulation 40 (see <u>Notification of Serious Events</u> <u>Procedure</u>), including a thematic analysis which seeks to identity any trends or escalating behaviours that may impact on the safety and well-being of the children and young people.

The Education Standard

8. The effectiveness of the home in promoting the educational attainment of children and young people in its care and the quality of relationships between the children's home and local schools. This would include any educational goals that have been achieved,

plans for alternative education or further education, and the aspirations for individual children and young people.

The Positive Relationship Standard

- 9. The arrangements for promoting and supporting the positive behaviour of children and young people in our care;
- The effectiveness of the approach to behavioural support, including arrangements for commissioning training for staff in behaviour management, physical intervention, and relational practice;
- 11. The number of times that children and young people have needed physical intervention to ensure their safety and well-being, and the steps taken by the children's home to minimise the use of physical intervention;
- 12. Whether there have been any occasions when children and young people in our care have been charged with a criminal offence.

The Health and Well-being Standard

- 13. The arrangements, if any, for commissioning therapeutic (or any other specialist) services appropriate to the needs of children and young people in our care and the effectiveness of any such arrangements in achieving health outcomes;
- 14. The arrangements for children and young people to be provided with general medical practitioner and other primary health care services, including access to preventive and screening services in the local community;
- 15. Details of any children and young people requiring accident and emergency treatment and other hospital services;
- 16. Illnesses of children in our care, and their progress through necessary treatment.

The Leadership and Management Standard

- 17. Risk assessments for health and safety purposes and subsequent action taken;
- 18. Fire drills and tests of alarms and of fire equipment;
- 19. The arrangements for the management and supervision of staff working at the home, including duty rosters and staff deployment in relation to any incidents at the home;
- 20. The arrangements for continuing professional development, recruitment and the training of staff working at the home.

Details of:

- a. Disciplinary action concerning persons working at the home;
- b. Staff grievances.

The reasons for staff ceasing employment at the home.

The arrangements for consultation with placing authorities, the local authority in whose area the home is located, and other community services used by children and young people in our care.

The effectiveness of the home's guidance and procedures concerning police involvement with the home.

On minimum annual basis, the registered manager must also review the home's Statement of Purpose, and make necessary improvements, which should be approved by the Regulatory Authority.

The Protection of Children Standard

- 19. The number of reports of children and young people in our care being absent without permission;
- 20. The measures taken by staff:
 - a. To prevent children and young people from being absent from the home without permission; and
 - b. The subsequent response to a child or young person being absent without permission from their home.
- 21. The effectiveness of arrangements agreed between the home, local Police, and the local authority for responding to missing person incidents in relation to children accommodated at the children's home.